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PTO/SB/97 (08-03)

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Patricia A. Verlangieri

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Serial No.: 09/873,638

Docket No.: PA000010

Examiner: Hanh Van Tran

Transmittal Form (2 Copies - 2 Pages)

Fee Transmittal Form (2 Copies - 2 Pages)

Petition for Extension of Time (2 Copies - 2 Pages)

Appeal Brief (7 Pages)

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/873,638	RECEIVED CENTRAL FAX CENTER
	Filing Date	June 4, 2001	
	First Named Inventor	Jisung Woo	DEC 09 2005
	Art Unit	3637	
	Examiner Name	Hanh Ven Tran	
Total Number of Pages In This Submission	Attorney Docket Number	PA000010	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Thomson Licensing Inc.		
Signature	<i>Patricia A. Verlangieri</i>		
Printed name	Patricia A. Verlangieri		
Date	December 9, 2005	Reg. No.	42,201

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Typed or printed name	Patricia A. Verlangieri
Date	December 9, 2005

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/873,638
	Filing Date	June 4, 2001
	First Named Inventor	Jisung Woo
	Art Unit	3637
	Examiner Name	Hanh Van Tran
Total Number of Pages In This Submission	Attorney Docket Number	PA000010

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

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Firm Name	Thomson Licensing Inc.		
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Printed name	Patricia A. Verlangeri		
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Typed or printed name	Patricia A. Verlangeri	Date	December 9, 2005

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 950

Complete if Known

Application Number 09/873,638

Filing Date June 4, 2001

First Named Inventor Jisung Woo

Examiner Name Hanh Van Tran

Art Unit 3637

Attorney Docket No. PA000010

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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None
Order

☒ Deposit Account:

Deposit
Account
Number

07-0632

Deposit
Account
Name

THOMSON LICENSING INC., Customer No. 24458

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	780	2001	385	Utility filing fee	
1002	350	2002	170	Design filing fee	
1003	550	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	0	0	0
Multiple Dependent Claims	0	0	0

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	43	Independent claims in excess of 3	
1203	300	2203	145	Multiple dependent claim, if not paid	
1204	88	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

Large Entity	Small Entity	Fee Description	Fee Paid
1051	2051	Surcharge - late filing fee or oath	
1052	2052	Surcharge - late provisional filing fee or cover sheet	
1063	1053	Non-English specification	
1812	1812	For filing a request for reexamination	
1804	1804	Requesting publication of SIR prior to Examiner action	
1806	1806	Requesting publication of SIR after Examiner action	
1251	2251	Extension for reply within first month	
1252	2252	Extension for reply within second month	450
1253	2253	Extension for reply within third month	
1254	2254	Extension for reply within fourth month	
1255	2255	Extension for reply within fifth month	
1401	2401	Notice of Appeal	
1402	2402	Filing a brief in support of an appeal	500
1403	2403	Request for oral hearing	
1451	1451	Petition to institute a public use proceeding	
1452	2452	Petition to revive - unavoidable	
1453	2453	Petition to revive - unintentional	
1501	2501	Utility issue fee (or reissue)	
1502	2502	Design issue fee	
1503	2503	Plant issue fee	
1480	1480	Petitions to the Director	
1807	1807	Processing fee under 37 CFR 1.17 (q)	
1806	1806	Submission of Information Disclosure Stmt	
8021	8021	Recording each patent assignment per property (times number of properties)	
1809	2809	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	2801	Request for Continued Examination (RCE)	
1802	1802	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$950)

SUBMITTED BY

Name (Print/Type)	Registration No. (Attorney/Agent)	Telephone	Date
Patricia A. Vortugler	42,201	(609) 734-6887	December 9, 2005
Signature			

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